

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

10/648450

## CLAIMS AS FILED - PART I

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20=    | *            |
| INDEPENDENT CLAIMS  | minus 3 =    | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 150.00 | OR | BASIC FEE | 300.00 |
| X\$ 25=   |        | OR | X\$50=    |        |
| X100=     |        | OR | X200=     |        |
| +180=     |        | OR | +360=     |        |
| TOTAL     |        | OR | TOTAL     |        |

## CLAIMS AS AMENDED - PART II

|   | (Column 1)                       |       | (Column 2)                         |   | (Column 3)    |
|---|----------------------------------|-------|------------------------------------|---|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR |   | PRESENT EXTRA |
| 6/13/05   |                                  |       |                                    |   |               |
| Total   | * 71                             | Minus | ** 71                              | = |               |
| Independent   | * 3                              | Minus | *** 3                              | = |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |   |               |

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|   | (Column 1)                       |       | (Column 2)                         |   | (Column 3)    |
|---|----------------------------------|-------|------------------------------------|---|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR |   | PRESENT EXTRA |
| Total   | *                                | Minus | **                                 | = |               |
| Independent   | *                                | Minus | ***                                | = |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |   |               |

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|   | (Column 1)                       |       | (Column 2)                         |   | (Column 3)    |
|---|----------------------------------|-------|------------------------------------|---|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR |   | PRESENT EXTRA |
| Total   | *                                | Minus | **                                 | = |               |
| Independent   | *                                | Minus | ***                                | = |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |   |               |

| RATE    | ADDITIONAL FEE |    | RATE   | ADDITIONAL FEE |
|---------|----------------|----|--------|----------------|
| X\$ 25= |                | OR | X\$50= |                |
| X100=   |                | OR | X200=  |                |
| +180=   |                | OR | +360=  |                |